PTO/SB/17 (10-08)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Complete if Known Application Number 10/555,723-Conf. #2043			
				Application Number Filing Date		November 7, 2005	
				Filing Date First Named Inv		Andreas Smolarek	
For FY 2009				Examiner Name		G. Alie	
Applicant claims small entity status. See 37 CFR 1.27				0704			
TOTAL AMOUNT OF PAYMENT (\$) 1,110.00				110075 7040011000			
Attorney Docket No.							
METHOD OF PAYMENT (that apply)					
Check X Credit Card		Money Order	None	Other (please identify):	
Deposit Account Deposit A	count Nu	mber: 23/2	825	Deposit /	Account Name:	Wolf, Greenfi	eld & Sacks, P.C.
For the above-identified	d depos	it account, the Dir	ector is h	nereby authorize	ed to: (checl	k all that apply)	
Charge fee(s) inc	licated b	elow		Charge	e fee(s) indi	cated below, exc	ept for the filing fee
X Charge any addit			nents of	x Credit	any overpa	yments	
fee(s) under 37 C	FR 1.16	and 1.17					
1. BASIC FILING, SEARCH, A	ND EXA	MINATION FEE	S				
,		NG FEES		RCH FEES	EXAMIN	ATION FEES	
Application Type	Foo (\$)	Small Entity Fee (\$)	E00 (\$)	Small Entity	E00 (\$)	Small Entity	Food Boild (\$)
Utility	330	165	Fee (\$) 540	Fee (\$) 270	<u>Fee (\$)</u> 220	<u>Fee (\$)</u> 110	Fees Paid (\$)
Design	220	110	100	50	140	. 70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES		***	O	Ŭ	V		Small Entity
Fee Description						<u>Fee (\$</u>	
Each claim over 20 (including	Reissue	es)				52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims						390	195
4.0			Fee	e Paid (\$) Multiple Dependent Claims			
HP = highest number of total claims	naid for if	x =			Fee	<u> </u>	ee Paid (\$)
		Fee (\$)	Fee	Paid (\$)	····	And a second sec	
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - or HP = X =							
HP = highest number of independent	t claims pa	aid for, if greater than	3.	100,000,000,000,000,000,000,000,000,000			
3. APPLICATION SIZE FEE If the specification and drawi listings under 37 CFR 1.52	2(e)), th	e application size	fee due	is \$270 (\$135 f			
sheets or fraction thereof. Total Sheets Extra	Sheets			/ CFR 1.16(s). ditional 50 or frac	tion thoron	Foo (\$)	Fee Paid (\$)
- 100 =	Oneca	/50 =		round up to a who			ree raid (\$)
4. OTHER FEE(S) Non-English Specification,	\$130 f	Manager and a supply a supply a supply and a supply a s		·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	44-1	Fees Paid (\$)
Other (e.g., late filing surch	arge): _	1253 Extension	for resp	onse within th	ird month		1,110.00
SUBMITTED BY	Λ						
Signature				Registration No. Attorney/Agent)	39,188	Telephone	617.646.8000
Name (Print/Type) Neil P. Ferra						Date Se	eptember 7, 2011
I hereby certify that this paper (alc system in accordance with § 1.6(a	ong with a	Certificate of E any paper referred to	lectronic as being	Filing Under 37 (attached or enclo	CFR 1.8 sed) is being	transmitted via the	Office electronic filing
Dated: September 7, 2011	es F	Sign	ature:			(,